ATTORNEY DOCKET: CELL 5.3 U.S.

	cant or Patentee: Capon et al.	
	or Patent No.:	CELL 5.3 U.S.
	or Issued:	Cional Transduction Bathways
For: _	Chimeric Chains for Receptor-Associated	Signal Transduction Pathways
	VERIFIED STATEMENT (DECLARATION STATUS (37 CFR 1.9(f) and 1.27(c)) -	
I here	by declare that I am	
[] [X]	the owner or the small business concern to an official empowered to act on behalf of below:	
NAME	OF CONCERN:The Regents of the Univ	versity of California
	RESS OF CONCERN: 1320 Harbor Bay Park	
	OF ORGANIZATION	
[X]	UNIVERSITY OR OTHER INSTITUTION OF	
[X]	TAX EXEMPT UNDER INTERNAL REVENU	E SERVICE CODE (26 USC 501(a)
[]	AND 501(c) (3)) NONPROFIT SCIENTIFIC OR EDUCATION, THE UNITED STATES OF AMERICA (NAM (CITATION OF STATUTE	IE OF STATE)
[]	WOULD QUALIFY AS NONPROFIT SCIENT STATUTE OF STATE OF THE UNITED STATES OF AMERICA (NAMEDITATION OF STATUTE	TIFIC OR EDUCATIONAL UNDER ATES OF AMERICA IF LOCATED IN ME OF STATE)
I herel	by declare that the above identified nonprof	it organization qualifies as a popprofit
	zation as defined in 13 CFR 1.9(e) for purp	
Patent	t and Trademark Office under Section 41(a)	or (b) of Title 35, United States Code,
with re	egard to the invention entitled <u>CHIMERIC</u>	CHAINS FOR RECEPTOR-
	CIATED SIGNAL TRANSDUCTION PATHW.	
	N; ARTHUR WEISS; BRIAN A. IRVING; MA	RGO R. ROBERTS; and KRISZTINA
ZSEBC	D described in	
[X]	the specification filed herewith	
[]	application serial no, filed	
[]	patent no, issued	
I hereb	by declare that rights under contract or law	have been conveyed to and remain
	he nonprofit organization having rights to the	
	to the invention are held by any person, other	

qualify as a small business concern under 37 CFR 1.9(c) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). *NOTE: Separate verified statements are required

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from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

NAME: CELL GENESYS	, INC.		
ADDRESS: 322 Lakeside Drive, Foster City, CA 94404			
[] Individual	[X] Small Business Concern	[] Nonprofit Organization	
NAME:			
ADDRESS:			
[] Individual	[] Small Business Concern	[] Nonprofit Organization	
I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.			
TITLE IN ORGANIZATION	INGI II IGNING		
SIGNATURE		DATE	

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DECLARATION AND POWER OF ATTORNEY

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

entitled: CHIMERIC CHAINS FOR RECEPTOR-ASSOCIATED SIGNAL TRANSDUCTION **PATHWAYS** the specification of which: [X] is attached hereto. [] was filed on _____, and identified as Attorney Docket No. _____ was filed on _____, as Application Serial No._____ [] I hereby state that I have reviewed and understand the contents of the aboveidentified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with title 37, code of Federal Regulations, Section 1.56(a). I hereby claim foreign priority benefits under title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor;s certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: Prior Foreign Applications (s) **Priority Claimed** PCT/US91/09431 12/12/91 Yes <u>X</u> No ___ (Country) (Number) (Day/Month/Year Filed)

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56 (a) which occurred between the filing date

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of the prior application and the national or PCT international filing date of this application:

07/988,194	December 9, 1992	Pending Pending
(Application Serial No.)	(Filing Date)	(Status - patented, pending, abandoned
07/627,643	December 14, 1990	Abandoned
(Application Serial No.)	(Filing Date)	(Status - patented, pending, abandoned

I hereby appoint the following attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: SaraLynn Mandel, Reg. No. 31,853; Lucy J. Billings, Reg. No. 36,749.

Direct all telephone calls to <u>SaraLynn Mandel</u> at (415) 358-9600 ext. 345.

Address all correspondence to:

SaraLynn Mandel Cell Genesys, Inc. 322 Lakeside Drive

Foster City, California 94404

File No. <u>CELL 5.3</u>

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

first inventor:	DANIEL J. CAPON
Inventor's signature:	
Date:	
Residence:	90 Woodridge Road; Hillsborough, CA 94010
Citizenship:	U.S.A.
Post Office Address:	90 Woodridge Road; Hillsborough, CA 94010
Full name of second inventor:	ARTHUR WEISS
Inventor's signature:	
Date:	
Residence:	10 Vasco Drive; Mill Valley, CA 94941

Declaration and Power of Attorney
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Citizenship:	U.S.A.	
Post Office Address:	10 Vasco Drive; Mill Valley, CA 94941	
Full name of third inventor:	BRIAN A. IRVING	
Inventor's signature:		
Date:		
Residence:	587 Arkansas Street; San Francisco; CA 94017	
Citizenship:	U.S.A.	
Post Office Address:	587 Arkansas Street; San Francisco; CA 94017	
Full name of fourth inventor:	MARGO R. ROBERTS	
Inventor's signature:		
Date:		
Residence:	4062-1/2 23rd Street, San Francisco, CA 94114	***
Citizenship:	England	
Post Office Address:	4062-1/2 23rd Street, San Francisco, CA 94114	
Full name of fifth inventor:	KRISZTINA ZSEBO	
Inventor's signature:		
Date:	.*.	
Residence:	200 Allen Road; Woodside, CA 94062	
Citizenship:	U.S.A.	
Post Office Address:	200 Allen Road; Woodside, CA 94062	

Applicant or Patentee: <u>Dan Capon, et al.</u> Serial or Patent No.:	Attorney's Docket No.: CELL 5.3
Filed or Issued:	DANCHICTION DATUMAVE
VERIFIED STATEMENT (DECLARATION) CLAIM STATUS (37 CFR 1.9(f) and 1.27(c)) - SMAI	ING SMALL ENTITY
Shereby declire that I am I the owner or the small business concern below: Bankerficial of the small business concern empower concern identified below:	red to act on behalf of the
NAME OF CONCERN: Cell Genesys, Inc.	
ADDRESS OF CONCERN: 322 Lakeside Drive Foster City, California 94404	
Foster City, California 94404	
I hereby declare that the above identified small busine business concern as defined in 13 CFR 121.3-18, and repurposes of paying reduced fees to the Patent and Trade and (b) of Title 35, United States Code, in that the nuconcern, including those of its affiliates, does not exof this statement, (1) the number of employees of the cover the previous fiscal year of the concern of the perpart-time or temporary basis during each of the pay perconcerns are affiliates of each other when either, directions or has the power to control the other, or a thas the power to control both.	produced in 37 CFR 1.9(d), for emark Office under Section 41(a) amber of employees of the sceed 500 persons. For purposes business concern is the average croson employed on a full-time, criods of the fiscal year, and (2 ectly or indirectly, one concern
I hereby declare that rights under contract or law have with the small business concern identified above with rCHIMERIC CHAINS FOR RECEPTOR-ASSOCIATED SIGNAL TRANSDUDANIEL J. CAPON; ARTHUR WEISS; BRIAN A. IRVING; MARGO F	regard to the invention entitled

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

ATTORNEY DOCKET: CELL 5.3

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING	K. SCOTT GREETS			
TITLE IN ORGANIZATION	Semor Vice President			
ADDRESS OF PERSON STANTING	322 Laureside Dr.	Forta (The CH 9440)	<u> </u>	
SIGNATURE LES		DATE	May 5, 1994	

Form 1.27 1/89